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CGFNS Examination Room Specifications Report

Center name and number: _____ Exam date: _____

Site / Room name and number: _____

Room maximum seating capacity for examinees: _____

Specifications

1. Floor of exam room: Flat surface Inclined

2. Amount of space between examinees: Side to side _____
Front to back _____

3. Seating type: Moveable Fastened to floor

4. Writing surface: Desk with attached chair
 Chair with writing arm
 Individual table Size _____
with separate chair
 Long table Size _____
Number seated / table _____
 Other, please describe _____

5. Size of writing surface per examinee: _____ wide by _____ long

6. Unusual room features: _____

CGFNS Examination Master Seating Chart

1. Show doors / exits, outline room boundaries
2. Show audio speakers
3. Show aisles separating seats
4. Enter seat numbers, circle seat number if applicant moved or given Observation Notice

Front of Room

Back of Room